

OFFICIAL FILE  
ILLINOIS COMMERCE COMMISSION

FORMAL COMPLAINT

Illinois Commerce Commission  
527 East Capitol Avenue  
Post Office Box 19280  
Springfield, Illinois 62794-9280

ORIGINAL

01-0339

Regarding a complaint

by DENISE JOHNSON  
(Person making the complaint)

against ILLINOIS POWER  
(Utility name)

as to unpaid balance

in GRANITE CITY  
(Reason for complaint) Illinois.

For Commission Use Only:

Case APR 20 1 51 PM '01  
CHIEF CLERK'S OFFICE  
ILLINOIS COMMERCE COMMISSION

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My mailing address is 2558 PARKVIEW DR. #3 GRANITE CITY, IL 62040

The service address that I am complaining about is 2833 RALPH ST. GRANITE CITY, IL

My home telephone number is 618 931-0208

Between 8:30 a.m. and 5:00 p.m. weekdays I can be reached at 800 844-3130

ILLINOIS POWER (respondent) is a public utility and is subject to the provisions of the Illinois Public Utilities Act.  
(Full name of utility company)

In the space below, list the specific section of the law, Commission rule(s), or utility tariffs which you think are involved with your complaint.

83 IL Adm Part 200.350

Have you contacted the Consumer Affairs Division of the Illinois Commerce Commission about this complaint? ☒ Yes ☐ No

Has your complaint filed with that office been closed? ☐ Yes ☐ No

Please state your complaint briefly. Number each of the paragraphs. Please include any specific time period and dollar amounts involved with your complaint. Use an extra sheet of paper, if needed.

1. On 2/9/01 I received a notice from IP stating they were transferring to my account an unpaid balance of \$1810.68 for services at 2833 RALPH ST. I spoke to an IP rep. who told me to fax copies of my divorce decree. They then removed all but \$388.12 stating that the amount remaining represents the amount I am responsible for until the divorce was final Jan., 2000.  
(Please see additional paper)

Please clearly state what you want the Commission to do in this case.

That I not be held responsible for Robert Johnson's bill.

Date: 4/17/01  
(Month, day, and year)

Complainant's signature Denise Johnson

If you will be represented by an attorney, please give the attorney's name, address, and telephone number.

You need to file the original and three copies of this form with the Commission and also provide the Commission one copy for each utility complained about (referred to as respondents).

#### VERIFICATION

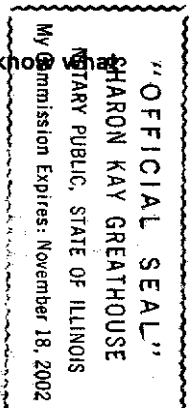
A notary public must watch you fill out this part of the form.

I, DENISE JOHNSON, first being duly sworn, say that I have read the above petition and know what it says. The contents of this petition are true to the best of my knowledge.

Denise Johnson  
(Signature)

Subscribed and sworn/affirmed to before me this 17 day of April, 19 2001.

Sharon Kay Greathouse  
Notary Public, Illinois



#### NOTE:

Failure to answer all of the questions on this form may result in this form being returned to you without processing. If you have questions, please call the counselor in the Consumer Affairs Division that handled your informal complaint.